

PROJECT PROGRESS REPORT				PERIOD COVERED	
				FROM	THRU
1. REPORTING AGENCY IAC		2. NAME OF CONTACT [REDACTED]		3. TELEPHONE NO.	
4. PROGRAM TITLE Autopilot Improvement				25X1A5a1	
STATUS OF PROGRAM					
5. PROGRAM		6. TESTING			
<input type="checkbox"/> PLANNING	<input type="checkbox"/> ACTIVE	<input type="checkbox"/> PLANNING	<input type="checkbox"/> ACTIVE	<input type="checkbox"/> SUSPENDED	<input type="checkbox"/> CANCELLED
7. OBJECTIVE OF TESTS Improve autopilot installation to obtain more consistent operation.					
8. PRIORITY	9. DATE PROGRAM INITIATED	10. DATE TESTING INITIATED	11. DATE OF ESTIMATED TEST COMPLETION		
12. OPERATING TIME					
TEST ARTICLE	TOTAL TEST HOURS OR RUNS RQR	HOURS OR RUNS THIS PERIOD	TOTAL HOURS OR RUNS TO DATE		
13. COMMENTS Other work has prevented any further work on this program.					